

ALFRED ADLER AND THE CURRENT MENTAL HEALTH REVOLUTION¹

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As Nicholas Hobbs (27) has noted, a revolution appears to be beginning in the mental health field. It is characterized by the penetration of public health concepts into the mental health field. Viewed from the perspective of this revolution, Alfred Adler appears to have had unique prescience. We would like to point to some of the new emphases, and show how much Adler's views were in harmony with them.

The revolution is arising from two sources of frustration. One is the frustration of an increasingly educated public which observes the continued failure of the schools to educate large segments of the population, and the growth of crime and violence. While a part of the public reacts to these problems with an urge to isolate and suppress, there are also strong voices, including politicians and heads of government agencies, urging reform and rehabilitation. If our democratic form of government is to survive, those favoring rehabilitative efforts to deal with these problems will have to win. They will need to seek and finance constructive innovations in the organization of human services that will meet needs which would simply overwhelm present-day rehabilitation organizations and traditionally oriented personnel (8). Of course, in relation to these problems, mental health organizations *per se* are far less important than schools and prisons. But mental health professionals logically should play a major role in refashioning the operations of the schools and prisons. Branching out from the organizations in which they have traditionally isolated themselves, they could play a vanguard role far greater than their numbers or present roles suggest.

The second source of frustration giving impetus to revolutionary change exists among the mental health professionals themselves. An

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increasing number of them, partly in response to their growing consciousness and concern over social problems, have become rather disillusioned about traditional remedial methods. Even a cursory examination of the most recent convention programs of the two APA's, for example, shows a decline in programs devoted to traditional theoretical issues and the refinement of traditional methods, relative to the large increase in the number devoted to innovative approaches attempting to deal with mental health problems. Also, professionals in training are questioning the methods and purposes of their training (20).

CIVIL RIGHTS AND POVERTY AS MENTAL HEALTH ISSUES

In considering the contributions of Adler from the perspective of the new departures on the horizon, it seems logical to start with the intensified concern with social issues by professionals that seems to underly the new directions. There is a vastly increased awareness among mental health professionals in the last five or ten years that, as professionals, they cannot divorce themselves from a concern over poverty and civil rights. There has been a tremendous heightening of awareness and concern over the devastating effect that the conditions created by poverty and prejudice can have in crippling the intellectual and emotional development of children, creating damage which is extremely difficult to remedy in later years. Many who never did so before have come to ask themselves, "What are the socio-economic and political factors which have allowed these injustices to remain so long?" Adler's view of this, expressed in 1920, might have been taken from one of the latest journals dealing with social action in relation to educational and mental health:

The essential point of my argument is this, that in a civilization where one man is the enemy of the other—for this is what our whole industrial system means—demoralization is ineradicable, for demoralization and crime are *by-products of the struggle for existence* as known to our industrialized civilization. The shadows of this struggle fall very early across the soul of the child, destroy its poise . . . and render it craven and incapable of co-operation (2, p. 350).

Adler saw clearly the link between the solution of health problems and the solution of socio-economic problems. He distinguished a number of trends linking the improvement of general social conditions with public health efforts. These trends and issues are:

(a) Higher standards of living of the disowned classes, shorter hours, Sunday rest, expansion of hospital facilities, sickness insurance, old-age care, accident insurance, homes for children, increase and improvement of the public schools, etc. (b) Relief of the poor. (c) Rise of the working class. Its increasing intelligence, progressing organization, and realization of common interests are leading

this class to demands which, raised in the fight for civil rights . . . , naturally prove to be eminently hygienic demands (10, p. 312). — We are fighting for healthy housing, adequate wages, for the dignity of labor, for solid knowledge, that these may some day be assured for our children (10, p. 314).

Note how much of this (the first quotation in 1902; the second in 1907) could have been written about our needs of today.

REHABILITATION TO THE COMMUNITY

The increasing recognition by both the inflictors and the afflicted of the extent to which society is responsible for creating the anti-social or emotionally troubled individual, has a great deal to do with the movement toward genuine rehabilitation in place of punishment in dealing with juvenile and adult delinquents. The movement away from maintaining institutions which remove the emotionally troubled person from the mainstream of society, and toward the use of relatively open community mental health centers, half-way houses, etc. probably is, in part, a response to this growing awareness of responsibility on the part of the larger community.

In any event, genuine rehabilitation, and as much involvement as possible of the troubled person in community affairs, now seems to almost everyone to make much better sense than punishment or isolation. In 1920, Adler advocated this modern view in a lecture on the "demoralized" children of his day:

Both courts and police work to no purpose because they always centre their attention upon questions other than the really radical and determining ones. . . . Institutions ought to be erected for taking care of these demoralized children, for bringing them back to life; not shutting them off from society, but, on the contrary, making them more adapted for it (2, pp. 349-350).

PREVENTION

Another aspect of the mental health revolution is a determination to give more than lip-service to the prevention of mental health problems. Adler's anticipation of the necessity for emphasis on preventative approaches can be inferred from the quote given earlier with respect to the prophylactic significance of improved socio-economic conditions for working people. Another quotation from Adler more directly shows his complete recognition, in 1918, of the need to give prevention a primary role if society's mental health problem is to be seriously reduced.

It is, of course, an exceedingly disagreeable task to pursue every individual who has gone wrong or who is afflicted with a neurotic illness or a psychosis, in order to improve or heal him. That would constitute a tremendous waste of energy and it is about time that we seriously turn our attention more definitely to *prophylaxis* (1, p. 326).

To achieve primary prevention Adler saw the necessity for finding a way to educate the general population in sound mental health practices: "The problem of human nature . . . cannot be pursued with the sole purpose of developing occasional experts. Only the understanding of human nature by every human being can be its proper goal" (3, p. 3).

To those most concerned with developing new solutions to the mental health problem, a crucial concept is the need to educate those who are in the "front lines" of interaction with the public, so that they may serve common cause with the mental health professional. Adler anticipated the necessity of involving people such as teachers and ministers in the mental health effort. "Until that time," he said, "it will always be the single case only which will find its way to the physician, and not before the error . . . has led to considerable damage to all" (6, p. 303).

Presumably Adler would not be surprised that the profession has not moved more rapidly in the direction of psychologically educating mental health nonprofessionals in the struggle to improve the mental health of our society. He pointed out that, "this is a sore point with academic investigators who consider their researches the exclusive property of a scientific group" (3, p. 3).

NONPROFESSIONALS AS PSYCHOTHERAPEUTIC AGENTS

Most professionals today do not look with disfavor upon widespread dissemination of general psychological knowledge *per se*. The probable sore point of the present and the immediate future concerns the practitioner as much or more than the acadamecian. It involves the question of whether people outside the mental health profession should be trained to collaborate in treatment; whether many such persons should be given sufficient knowledge and skill so that they could assume guided responsibility for certain aspects of the treatment process which have hitherto been in the exclusive province of the psychotherapist (e.g., 13). It seems reasonably certain that Adler would support such an effort since he wished "to disseminate the ideas derived from a knowledge of men . . . so that all can aid us with their strength and in every possible manner" (1, p. 326).

This statement anticipates that component of the mental health revolution which involves the use of nonprofessionals as psychotherapeutic agents (24). Deane and Ansbacher (15) have pointed out the relevance of Adler's views to this rapidly growing strategy:

What would be the theory underlying the observed phenomenon that the professionally untrained mental hospital attendant can be an effective psychotherapeutic agent? It was Adler who stated that the factor which all psychotherapies have in common and which is the prerequisite for all, is that they establish for the patient a good human relationship, possibly for the first time in his life. . . . In order to awaken community feeling, all those who come in contact with the patient must, of course, demonstrate to him by their own actions that a community of man does indeed exist . . . This is not something which those with professional training can do better than others . . . quantitatively and qualitatively, patient and attendant are more linked together than are patients and other staff members (p. 157f).

Parents

One central aspect of the modern revolution in mental health is a recognition of the necessity for concentrating our efforts and resources on the psychological welfare of children. Hobbs in discussing this, says that the allocation of at least 75% of our resources to the mental health problems of children "is the only way to make substantial changes in the mental health of our adult population a generation from now" (27, p. 829).

Adler, who obviously thought along similar lines, regarded the home, and particularly the mother's role, as the major key to the development of the social and emotional well-being of the child. Current works developing his views further are by Dreikurs and Soltz (17), Soltz (35), and Statton (38) who are doing so much to educate parents in sound child-rearing methods.

Regarding behavior therapists such as Hawkins et al. (26), Shah (34), O'Leary et al. (31), and Walder et al. (41), and relationship therapists as myself and my colleagues (18, 25, 39), Adler would very likely approve of their strategy, although he might well question the adequacy of their theoretical views. They are attempting to impart the knowledge and skills to parents which will enable them to remedy the psychological problems of their own children.

Adler said, "If parents were also good educators, with the necessary insight and ability to recognize mistaken development in their children when it began, and if, further, they were capable of combating these errors by proper education—we would be happy to admit that no institution were better adapted for the protection of valid human beings [than the family]" (3, p. 279). Today, the trainers of parents as therapeutic agents, are addressing themselves to the inculcation in parents of precisely these proficiencies.

While Adler pioneered joint conferences with parent and child, and in a general way regularly instructed parents in beneficial ways of responding to their disturbed children, the time was not yet ripe

for a more general and systematic approach of training parents to be psychotherapeutic agents.

But, amazingly, Adler was fully cognizant of the fact that the psychiatrist himself, was in a very poor position to be an effective psychotherapeutic force: "The psychiatrist sees the child once or twice a week—perhaps even once a day—but he does not really know the influences from the environment, from the family, . . . from the school" (5, p. 158).

Teachers

Aside from the parent, and if not the psychiatrist, who then is in a position to influence a child powerfully minute by minute, day in and day out? In answering this question myself, without knowledge of the pertinent writings of Adler at the time, I pointed to two other groups: the child's peers and his teachers (24, p. 4f). Adler and his students had long ago anticipated psychotherapeutic use of both these groups.

Adler recognized, as do Dreikurs (16) and Glasser (23) today, that the positive general development of the child, not just his intellectual skill, was the business of education, and of the teacher. He believed that, "The school is placed between the family and life in society. It has the opportunity of correcting mistaken styles of life formed under family upbringing, and the responsibility of preparing the child's adjustment to social life" (7, p. 399). He regarded the task of instructing teachers in the knowledge and skills necessary to perform this role as one of primary importance.

Children come to school who have been failures in family life; and their mistakes are not diminished, in spite of all the lectures and exhortations they get. There is nothing left, therefore, but to train the teachers to understand and help the development of children in the school (5, p. 158).—We can hope . . . to reach all the teachers and through them to reach all the children; to correct the mistakes which have already been made and to train the children for an independent, courageous and cooperative life. In this work, it seems to me, lies the greatest promise for the future welfare of mankind (5, p. 178).

Adler was aware, just as knowledgeable professionals are aware today, of the handicaps facing teachers when it comes to serving as psychotherapeutic agents for children, and the sad state of affairs that existed, and persists to this day, in the typical classroom.

We know the demerits of our schools. The crowded classes, the insufficient training of many of the teachers, occasionally their lack of interest, for they suffer intensely from cramped economic conditions, and more is hardly to be expected of them. Primarily however, the greatest drawback of the school is *the prevailing ignorance about the psychic development of the child*; and that is the reason why

hitherto the relations of the teacher and pupil have been so much more hopeless than those existing elsewhere in life. If the pupil makes a mistake he is either punished or given a poor mark. That is about the same as . . . a doctor called to treat someone who has a broken a bone, saying: "You have a bone fracture! Good-bye!" (2, p. 346)

But Adler had faith in teachers' capacity to acquire the necessary knowledge and skill:

No one can know the minds of children so well as a teacher who lives with them. He sees so many types of children, and, if he is skillful, establishes a connection with each one of them. It rests with him whether the mistakes a child has made in family life shall continue or be corrected. Like the mother, he is the guardian of the future of mankind, and the service he can render is incalculable (5, p. 191).

Adler did not have the reservations which so many professionals seem to have, even today, about removing the shroud of mystery surrounding psychotherapeutic efforts and delegating much of this task to laymen: "The teacher must know everything the psychiatrist knows, so that after discussing the child's problem he can proceed on his own, without further help. If any unexpected problem turns up, he should understand just what to do, just as the psychiatrist would if he were present" (5, p. 159).

Adler further sought to expand the therapeutic role of the teacher by "diagnosing fewer cases as the kind in which the child's unsociability was so severe that the influence of the teacher alone could not be considered sufficient to help" (19, p. 379).

Peers

After parents and teachers, the most powerful influence on the psychic life of children rests with other children, with their peer group. The idea of using peers as psychotherapeutic agents for children is currently being explored by behavior therapists such as Gittelman (22), Straughn et al. (40), and by others (32). The teacher-therapy principle elucidated by Reissman (33) maintains that the act of helping another overcome his personal or educational problems, not only proves to be an efficient way to help the person with the primary problem, but often provides a significant dividend through helping the helper as well. This is an extremely exciting approach now being used in the fields of education (e.g., 21), drug addiction (e.g., 42, 28), correction (e.g., 11, 36), alcoholism, where Alcoholics Anonymous has employed this principle for a long time (e.g., 30, 14), as well as psychotherapy in general (e.g., 12).

Adler saw the potential power of the peer group for psychotherapeutic purposes with children long ago, stating: "I have seen many

'difficult' children whose attitude was entirely changed through the interest and cooperation of their fellow children" (7, p. 402). One of Adler's associates, the educator F. Birnbaum, is quoted as stating: "Children who have recently overcome a certain form of problem behavior help schoolmates who are not yet free of the same difficulty" (7, p. 404).

DEMOCRATIC PSYCHOTHERAPEUTIC CLASSROOMS

As a final point in discussing the remarkable aptness of Adler's views to those most concerned with developing effective mental health strategies today, I would like to turn to a concept which can probably not yet be regarded generally as part of the mental health revolution, but which I hope will become so. In my own opinion—and this was an opinion I arrived at quite independently of any knowledge of prior work in the area—one of the most powerful psychotherapeutic forces which could be put to work in this society could take place in the public schools, beginning at the elementary level.

It would come about through changing the culture of the classroom from one that is essentially autocratic to one that is essentially democratic, and the role of the teacher from a disciplinarian and critic to a sophisticated, empathic group leader and an educational consultant. I think that a change of this nature within our schools would accomplish two critically important things.

First, the provision of freedom of choice within a context of social effort and responsibility should provide a gut-level understanding of democratic processes which—once the children had achieved maturity—would allow our democratic system to function so effectively as to be all but immune from deterioration from within.

Secondly, with a democratically functioning teacher, one who had learned empathy and who had acquired true respect for children, it would be possible to accomplish a very significant broad-scale psychotherapeutic advance. Children would feel comfortable to share their concerns with one another and with the teacher, and to be helpful to one another in solving their individual and mutual psychological and interpersonal problems in a context of objective interpersonal feedback and empathic support.

It was quite amazing to me to discover that the fundamentals of such a program were anticipated by Oskar Spiel (29, 37), an Adlerian educator, many decades ago, and that his colleague, Birnbaum, had stated about a properly conducted classroom:

Life-problems of the individual pupil . . . may be brought close to a happy solution in group discussion. We have here essentially the same mental processes which make for part of the success of public child-guidance clinics. The child learns to regard his failures not as a private matter, but through and with the eyes of others as a public matter. Thus we succeed in many cases in helping the child to discard the spectacles of his customary "biased apperception" and to take up an objective position (7, p. 403).

It was not without good reason—from their own point of view—that one of the first objectives for the Austrofascists when they overthrew the Austrian Republic in 1934 was to kill the school reform and all activities connected with it such as the innovations inspired by Adler (19, p. 381).

I should add that today the idea of the democratic classroom is vigorously pursued in the United States by the Adlerian, Rudolf Dreikurs. In his *Psychology in the Classroom* (16) he deals with democratic vs. autocratic classroom leadership, where the class discussion takes a prominent place (pp. 72-83), and also points out that the idea of the class discussion actually ante-dated Adler (pp. 78-79n). One entire chapter is devoted to examples of classroom discussions (pp. 185-224). Dreikurs also makes clear that democracy in the classroom is not to be confused with permissiveness but goes rather well with firmness (p. 61).

Glasser, from his viewpoint of reality therapy, also advocates classroom meetings, and in his *Schools without Failure* (23) devotes several chapters to these meetings. They may deal with problems of living in the school world, intellectually important subjects, or concepts of the curriculum. This is within the larger conception that our schools should provide "experience in democracy" (p. 37), which at present they do not.

SUMMARY

This paper has attempted to show how consonant Adler's views are with some of the major emphases of the currently emerging revolution in mental health. The views discussed were those relevant to: civil rights and poverty as mental health issues; rehabilitation to the community; the necessity for preventative mental health programs; the use of nonprofessionals—parents, teachers, and peers—as psychotherapeutic agents; and the concept of democratic, psychotherapeutic classrooms. Among the founding giants of modern psychotherapy, Adler's views seem uniquely in accord with the now-developing strategies. His work deserves review by all who are con-

cerned with advancing toward a psychologically healthier society as rapidly as possible.

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